## CASUALTY ASSISTANCE CHECKLIST

(to be completed by retirees and spouses and kept in your files for your survivors to use

Name:	en by remees and spouses.		
Social Security Numbe	r:		
Date of Birth:			
Date of Retirement:	Reti	red grade/rank:	
Enrolled in RSFPP, SB	P, SSBP (circle all that apply	y) Did you disenroll from this	plan? YES NO (circle
one)			
VA Claim #:		·	
<del>-</del>		f not currently in receipt): YES 1	NO
Receiving Social Secur	rity: YES NO If yes, age a	t which first received:	
Organ donor: YES N	IO		
s there a living will? Y	YES NO		
SPOUSE INFORMA	ATION		
Name:		Date of birth: SS	N:
MARRIAGE INFO	RMATION	Duce of offer.	
Date of Marriage:	Place of Marriage (C	City, State, Country):	
CHILDREN INFOR			
Name Birthdate Ade	dress	1	Incapable of self-support?
INSURANCE POLI	CIES		
Policy # Company	Amount (include "as of" da	te) Beneficiary	Agent phone #
INVESTMENTS			
Type (IRA, CD, Mutua	al Fund) Company Amo	unt (include "as of" date)	Agent phone #
BANK ACCOUNTS			
	Type of Acct Amount (in	clude "as of" date) Account	#
	-31	•	
CREDITORS Name & Address	Phone # Account # Balance	ce Due (include "as of" date) I	Life insurance?
Maille & Muuless	THORE IT TOOUGH IT DAIGH	10 2 no (morney no or anie)	

## **BURIAL INFORMATION** Who should be notified of your death: Phone # Name Relationship Address Do you want to be (circle one): Buried Cremated? Name of cemetery where you want to be buried: Do you want to be buried in your uniform? YES NO Do you want a memorial service? YES NO If ves, where? Have you purchased a burial plot? YES NO If yes, where? Do you have a preference of funeral home? YES NO If yes, which one? Do you want a military honor guard? YES NO LOCATION OF DOCUMENTS WHERE LOCATED DOCUMENT Living Will **Current Retired Pay Statement** Marriage Certificate(s) Divorce Decree(s)/property settlement(s) (from previous marriages of retiree or spouse) Death certificate(s) (from previous marriages of retiree or spouse) Birth certificates/adoption papers (retiree, spouse, children) DD Form(s) 214 (Active Duty Discharge Record ) (for all periods) Retirement Orders Safe-Deposit Box **List Contents:** Will Vehicle Registration & Title Insurance policies Investment papers Burial plot information Uniform for burial Medical and dental records Real Estate deeds Tax returns PHONE NUMBERS Casualty Assistance Office (immediate assistance upon retiree's death) call 1-800-626-3317 or, from overseas, call collect (703) 325-7990 Retirement Services Office (follow-up assistance) numbers are listed on pages 9 and 10 of Echoes Social Security 1-800-772-1213 VA Insurance 1-800-669-8477 VA 1-800-827-1000 Annuitant Pay (for RSFPP and SBP info) 1-800-435-3396 Retired Pay 1-800-321-1080

Lawyer

ID Card office